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Did You Know?

It is not effective to rely solely on billing statements, member notification, or collection agencies as the only means of obtaining eligibility and billing information. Providers are expected to take appropriate and reasonable action to identify Health First Colorado eligibility within 365 days (timely filing guidelines). This information can be found in the General Provider Information Manual.

All Providers

Upcoming Provider Enrollment Portal Update for Change of Ownership Applications and Provider Web Portal Update for Disenrollment Requests

It is anticipated that on August 11, 2021, the [Provider Enrollment Portal](#) will be updated for change of ownership enrollment applications with a new Federal Employer Identification Number (EIN) and the [Provider Web Portal](#) will be updated for voluntary disenrollment requests.

Change of Ownership with New EIN Enrollment Applications

A change of ownership that results in a change of EIN terminates the Provider Participation Agreement. New owners and providers with a new EIN must re-apply, submitting a new enrollment application that includes the selling provider's information and a new Provider Participation Agreement.

Owners/providers indicate that an enrollment application is connected to a change of ownership resulting in an EIN change on the **Change of Ownership** panel of the Provider Enrollment Portal. The new owners/providers should update the "Is the application due to a change of ownership where the EIN is changing?" field to "Yes". This action displays the Previous Ownership section. All fields on the Previous Ownership section are required and must be completed with the selling provider's information (See image below).

Change of Ownership and EIN

*Is this application due to a change of ownership where the EIN is changing? Yes No

Previous Ownership

Enter previous ownership information. All fields are required. Click the magnifying glass to search for and select the appropriate Selling NPI/Health First CO Provider ID. The Change of Ownership Effective Date can be a retroactive date to the first of the current calendar year, the current date, or date in the future up to 90 days.

*Selling NPI/Health First CO Provider ID *ID Type

Name

*Selling Provider Contact Name

*Selling Provider Contact Phone Number

*Change of Ownership Effective Date

Upon receipt of a completed change of ownership enrollment application, the indicated selling provider will receive a letter from Health First Colorado with further instruction on the voluntary disenrollment process. The change of ownership enrollment application cannot be processed for approval until the selling provider completes and submits a voluntary disenrollment request through the Provider Web Portal.

Ownership or organizational changes (such as changes in owners or board members) that do not result in an EIN change do not require a new enrollment application and will continue to be submitted through the Disclosures panel of the Provider Maintenance or Revalidation applications.

Legal name changes are submitted using the [Legal Name Change Form](#), available on the [Provider Forms web page](#) under the "Provider Enrollment and Update Forms" drop-down. Complete the form, include the required documentation and submit via the Provider Web Portal using the steps indicated on the form.

Visit the [Change of Ownership \(CHOW\) FAQs web page](#) for more information. Visit the [Change of Ownership Provider Enrollment Portal Quick Guide web page](#) for more information regarding enrollment applications due to a change of ownership.

Disenrollment Requests

Disenrollment requests submitted through the Provider Web Portal will be updated for the following:

- Disenrollment - The Requested Disenrollment Date can be no less than 30 days, and no greater than 90 days from the current date. This update allows a 30-day waiting period in compliance with the “Termination” section of Provider Participation Agreement; prevents claims from being processed after the disenrollment date; and provides time for continuity of member care.
- Disenrollment Due to a Change of Ownership - Selling providers may indicate “Change of Ownership” as the Disenroll Reason. For these disenrollment requests, the Requested Disenrollment Date can be the current date, a future date, or a retroactive date that falls within the current calendar year. Selling providers will have to complete and attach a Change of Ownership form with the disenrollment request.

Providers may cancel a voluntary disenrollment request before it has been finalized. Visit the [Disenrollment Provider Web Portal Quick Guide web page](#) for more information regarding voluntary disenrollment requests.

Continuity of Care

New owner/providers cannot submit claims before the enrollment application is approved. Additionally, the new owner/providers may not submit claims using the selling provider’s EIN or NPI/Health First Colorado ID. The selling and new owner/providers must coordinate, verifying their effective disenrollment and enrollment dates in order to maintain continuity of care for Health First Colorado members throughout the change of ownership and disenrollment process.

Providers may contact their assigned [Provider Field Representative](#) for assistance with this process.

All Medication Prescribers

New Prescriber Tool for Health First Colorado

The Prescriber Tool empowers providers with real-time information on prescription drug costs and affordable alternatives. The goals of the Prescriber Tool are to help improve patient health outcomes and service, reduce administrative burden for prescribers, improve prescription drug affordability for Coloradans, employers and the state, **and support providers with value-based payments that reward them for addressing the number one contributor to rising health care costs - rising prescription drug costs.**



Enabled for both Health First Colorado and commercially covered patients, the Prescriber Tool reduces re-work and administrative burden for providers by enabling e-Prescribing and e-Prior Authorization while improving convenience for patients. The intention is to reward prescribers beginning in July of 2022 for using the tool and generating savings during the fiscal year beginning July 2021. The following affordability functionalities are in approximately 100 electronic health records (EHRs), representing 85% of Medicaid providers, with no click charges:

- **Real-Time E-Prescribing:** Prescribers can now send prescriptions electronically to pharmacies for Health First Colorado patients, increasing convenience and saving time for patients, prescribers and pharmacies.
- **Real-Time Benefits Inquiry:** Prescribers now have rapid insight into preferred medications from the Health First Colorado preferred drug list, empowering them with drug affordability and cost options.
- **Real-Time Prior Authorization:** Prescribers can now get rapid prior authorizations, reducing workload and avoiding manual entry, forms, faxes, lists and rework.

Ensure that your EHR has the Real-Time Benefit Check affordability capabilities above enabled to avoid missing out on the entirety of available Medicaid value-based payments next fiscal year that are based on use of the tool this fiscal year.

Visit the [Prescriber Tool Project web page](#) for more information.

Prescription Drug Monitoring Program and Controlled Substances

Effective October 1, 2021, Medicaid providers permitted to prescribe controlled substances must query the Colorado Prescription Drug Monitoring Program (PDMP) before prescribing controlled substances to Medicaid members, in accordance with Section 5042 of the “Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and the Communities Act (SUPPORT Act)”.



The requirement to check the PDMP do not apply when a member:

- Is receiving the controlled substance in a hospital, skilled nursing facility, residential facility, or correctional facility
- Has been diagnosed with cancer and is experiencing cancer-related pain
- Is undergoing palliative care or hospice care
- Is experiencing post-surgical pain that, because of the nature of the procedure, is expected to last more than 14 days
- Is receiving treatment during a natural disaster or during an incident where mass casualties have taken place

- Has received only a single dose to relieve pain for a single test or procedure

Visit the [About the PDMP Program web page](#) for more information about the PDMP Program.

Behavioral Health Providers

Fee-for-Service (FFS) Behavioral Health Rate Rebalance Effective April 1, 2021

Fee-for-Service Behavioral Health Services were reviewed through the [Medicaid Provider Rate Review Advisory Committee \(MPRRAC\)](#) in 2019. Rates for FFS behavioral health codes were rebalanced to 80%-100% of the Medicare benchmark as a result of findings from the 2019 Medicaid Provider Rate Review Committee Recommendation Report and the subsequent budget request approved by the Joint Budget Committee. Effective April 1, 2021, rates that were less than 80% of Medicare were increased to 80% of the Medicare rate. Rates that were greater than 100% of Medicare were reduced to 100% of the Medicare rate.

The following fee-for-service behavioral health codes were impacted by rebalancing:

90791	90791 w/ GT	90792	90832	90832 w/ GT
90833	90833 w/ GT	90834	90834 w/ GT	90836
90836 w/ GT	90837	90837 w/ GT	90838	90839
90840	90846	90846 w/ GT	90847	90847 w/ GT
90849	90853	96105	96110	96125
96127	H0001 w/ HF	H0004 w/ HD HQ	H0004 w/ HF	H0005 w/ HF
H0006 w/ HF	S9445 w/ HF			

All rates for fee-for-service behavioral health codes can be found on the [Health First Colorado Fee Schedule](#). The rates that were part of the rebalance received the across-the board 2.5% increase, effective July 1, 2021, and are posted on the [Provider Rates and Fee Schedule](#) web page.

Contact Marli Firillo at Marli.Firillo@state.co.us and Victoria Martinez at Victoria.L.Martinez@state.co.us with any questions.

Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Providers

Peristeen System Coding Update

Effective July 1, 2021, the Peristeen System can be requested and billed using Healthcare Common Procedural Coding System (HCPCS) code E1399. One (1) unit of service is equal to three (3) months of supplies for this system. Claims will be manually priced according to the policies found in the DMEPOS billing manual. This is a temporary coding change until further notice from the Department.

Contact Haylee Rodgers at Haylee.Rodgers@state.co.us with any questions.

Hospital Providers

General Updates

All Hospital Providers

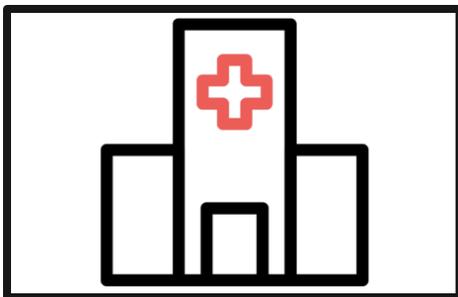
Hospital Stakeholder Engagement Meetings

Bi-monthly Hospital Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing. [Sign up to receive the Hospital Stakeholder Engagement Meeting newsletters.](#)

- The All-Hospital Engagement meeting is scheduled for [Friday, September 10, 2021, from 1:00 p.m. - 4:00 p.m. MT](#) and will be hosted virtually.

Visit the [Hospital Stakeholder Engagement Meeting web page](#) for more details, meeting schedules and past meeting materials. Calendar Year 2021 meetings have been posted.

Rural Hospital Stakeholder Engagement Meetings Discontinued



The need for separate Rural Hospital Stakeholder Engagement meetings has been periodically assessed and it has been decided to discontinue them. The rationale for this decision is that topics intended for discussion during both the rural and broader hospital engagement meetings are identical, yet questions and concerns expressed amongst providers during these meetings are not always the same. The Department believes there are potentially harmful effects to hospital representatives

only attending either meeting as responses to questions or concerns have impacts amongst the entire hospital community. There is also efficiency gained in having a single meeting for the purposes of later review. While further rural hospital-specific meetings are not currently scheduled, the Department remains amenable to dedicated meetings to this subgroup when sufficiently justified.

Contact Andrew Abalos at Andrew.Abalos@state.co.us for more information on the discontinuing of the Rural Hospital Stakeholder Engagement meetings. Contact Jonathan Rempfer at Jonathan.Rempfer@state.co.us with any questions or topics to be discussed at future meetings. Advanced notice will provide the Rates team time to bring additional Department personnel to the meetings to address different concerns.

Rural Health Clinics

Bi-monthly Rural Health Clinic Engagement meetings will continue to be hosted to discuss current issues regarding payment reform and operational processing.

- The next Rural Health Clinic Engagement meeting is scheduled for [Thursday, September 9, 2021, from 12:30 p.m. to 1:30 p.m. MT](#) and will be hosted virtually. The meetings are now held on Zoom.

Visit the [Rural Health Clinic Engagement Meeting web page](#) for more details, meeting schedules and past meeting materials. Calendar Year 2021 meetings have been posted.

Contact Erin Johnson at Erink.Johnson@state.co.us with any questions or topics to be discussed at future meetings. Advanced notice will provide the Rates team time to bring additional Department personnel to the meetings to address different concerns.

Independent Laboratory, Physician Services and Hospital Providers

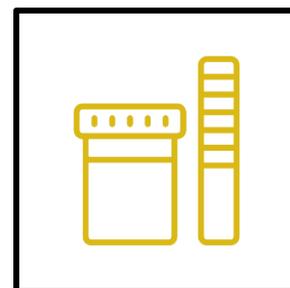
Replacement of Current Procedural Terminology (CPT) Codes with Healthcare Common Procedure Coding System (HCPCS) Codes

Effective August 1, 2021, CPT codes 80320-80377 will be discontinued. Definitive drug testing should be billed using HCPCS codes G0480-G0483.

Current rates can be found on the [Health First Colorado Fee Schedule](#).

Reference the [Laboratory Billing Manual](#) for further guidance.

Contact Justen Adams at Justen.Adams@state.co.us with any questions on this code change or policy.



Pediatric Personal Care Providers

Increased Rate for Pediatric Personal Care

Effective July 1, 2021, the rate for code T1019 increased to \$4.99 per 15-minute unit. Care provided within Denver County, under code T1019, from January 1, 2021, through June 30, 2021, will be reimbursed at \$5.44 per 15-minute unit.

Effective July 1, 2021, care provided within Denver County under code T1019 will be reimbursed at \$5.89 per 15-minute unit.

All claims for this service provided since January 1, 2021, were reprocessed to pay the higher rate. If claims were submitted at the prior rate, providers must resubmit their claims at the new rate to receive the increase. The fee schedule has also been updated to reflect this change.

Contact Christina Winship at Christina.Winship@state.co.us with any questions.

Pharmacy and All Medication-Prescribing Providers

Brand Name Medication Favored Over Equivalent Generic



Certain brand name products are managed by favoring them over the generic equivalent non-preferred medications. The **Brand Favored Product List** is accessible from the [Pharmacy Resources web page](#).

Pharmacies may reach out to the Magellan Rx Management Pharmacy Call Center at 1-800-424-5725 for assistance if needed, available 24 hours a day, 7 days a week.

Pharmacy and Therapeutics (P&T) Committee Member Openings

There are two open positions for the P&T Committee member terms 2021-2022.

Applicants are being accepted for the following two (2) open positions:

- One physician who specializes in the practice of psychiatry
- One physician who specializes in the treatment of members with disabilities

If interested in serving or know someone who would be qualified, please submit/have them submit a CV along with a completed [Conflict of Interest form](#) to:

Colorado Department of Health Care Policy and Financing
Attn: Brittany Schock, PharmD
Fax to 303-866-3590 or email Brittany.Schock@state.co.us

Pharmacy Providers

Total Annual Prescription Volume (TAPV) and COVID-19 Vaccines

Guidance has been received from the Centers for Medicare & Medicaid Services (CMS) that COVID-19 vaccinations may be excluded from the TAPV count. This exclusion will be granted for the September 1, 2020, through August 31, 2021, reporting volume timeframe **only**. The TAPV surveying will begin October 1 through October 31 of 2021 and will include a note that COVID-19 vaccinations may be excluded from the pharmacy's TAPV count.

As a reminder, pursuant to 10 CCR 2505-10, Section 8.800.13.1: The designation of a pharmacy's Dispensing Fee shall be updated annually. Every October, the Department shall contact a pharmacy requesting the completion of an attestation letter stating the pharmacy's Total Prescription Volume for the period September 1 to August 31. A pharmacy shall have until October 31 to provide the completed attestation letter to the Department. Using the attestation letter, the Department shall update a pharmacy's Dispensing Fee effective January 1. A pharmacy failing to provide the Department an attestation letter on or before October 31, regardless of their previous Dispensing Fee, shall be reimbursed the \$9.31 Dispensing Fee.



Contact Kristina Gould at Kristina.Gould@state.co.us for any questions related to this guidance.

Physician-Administered Drugs (PADs) Providers

PADs Prior Authorization (PA) Update

A select number of PADs, listed below, will be subject to PA requirements, no earlier than **October 1, 2021**. When a specific implementation date is known, the Department will allot an appropriate amount of resources and time for proper messaging and training.

After implementation, providers should ensure that any Health First Colorado member due to receive any of the following PADs have an approved PA on file prior to administration.

Drug Class	HCPCS	Drug Name
Bone Resorption Inhibitor Agents	J0897	Prolia
		Xgeva
Immune Globulin Agents	J1459	Privigen
	J1556	Bivigam
	J1557	Gammaplex
	J1561	Gammaked
		Gamunex
		Gamunex-C
	J1566	Gammagard S/D
	J1568	Octagam 5%, 10%
	J1569	Gammagard Liquid
	J1572	Flebogamma DIF
J1599	Asceniv	
	Panzyga	
Monoclonal Antibody Agents	J0517	Fasenra
	J1300	Soliris
	J1745	Remicade
	J2182	Nucala
	J2357	Xolair
	J2786	Cinqair
	J3380	Entyvio
Multiple Sclerosis Agents	J2323	Tysabri
	J2350	Ocrevus
Neuromuscular Agents	J0585	Botox
	J0586	Dysport
	J0587	Myobloc
	J0588	Xeomin

All PAD PA procedures and clinical criteria will be located in the upcoming Appendix Y: Physician Administered Drug Medical Benefit Prior Authorization Procedures and Criteria. Notification will be sent out when this appendix becomes available.

Keystone Peer Review Organization (Kepro) will offer various training sessions to providers within the coming months. Additional information will be sent via email, newsletters and monthly provider bulletins and posted to the [ColoradoPAR: Health First Colorado Prior Authorization Request Program](#) and [Physician Administered Drug Provider Resources web page](#).

Email HCPCS_PAD@state.co.us with all other PAD questions.

Physician Services, Hospitals, Clinics Providers

Colorado Joint Vaccine Task Force Advises Providers to Take Every Opportunity to Vaccinate Every Eligible Person

The Colorado Joint Vaccine Task Force has joined the Centers for Disease Control and Prevention (CDC) in guidance advising that providers are encouraged to vaccinate every eligible person who requests a COVID-19 vaccination.



Colorado has administered more than 5 million doses of lifesaving COVID-19 vaccine. Approximately 2.4 million Coloradans are fully vaccinated, and more than one hundred million people are fully vaccinated in the United States. The more Coloradans who are vaccinated, the fewer COVID-19 cases, hospitalizations, outbreaks and deaths that will occur.

Providers are encouraged to vaccinate every eligible person who requests a vaccine, even if it means puncturing a multidose vial without having enough people available to receive each dose. While the focus is on taking every opportunity to vaccinate, here

are some ways providers can help minimize wastage:

- Consider establishing and promoting standing vaccination days or half-days to increase the likelihood of larger numbers of people requesting vaccination on the same day.
- Vaccinate family members or friends of those who accompany patients to medical visits even if they are not established patients at the vaccinating practice.
- Continue outreach to employers or other community partners that have a large membership or network to arrange vaccination events.
- Attempt to contact additional persons (i.e., from a waitlist or through personal contacts of persons being vaccinated) to use as many vaccine doses as possible.
- Consider partnering with local public health agencies or other clinics that might be able to quickly use any extra doses from a punctured vial.

Once punctured, multidose vials must be used within 12 hours for Moderna, six (6) hours for Pfizer and two (2) hours for Johnson & Johnson/Janssen.

It is common for providers to not use an entire vial with other multi-dose vaccines. For example, in 2020, 11 percent of publicly funded influenza vaccines were unused. Colorado, in collaboration with providers and partners, will continue to do everything possible to minimize the amount of vaccine that goes unused.

Continue to stay up to date by visiting covid19.colorado.gov.

Help in the fight against COVID-19 by encouraging family, friends and communities to get vaccinated. Join the Community Corps to [get tips, tools and resources to share](#). Contact [CMS Partnerships via email](#) for more information on CMS COVID-19 Partner Updates.

Find [more opportunities to participate on the We Can Do This website](#).

“Back to School” Vaccinations

The Connecting Kids to Coverage National Campaign aims to get children and teens vaccinated so they are protected when they go back to in-person learning. The campaign’s many resources to promote well-child visits and vaccines can be found on InsureKidsNow.gov.

Substance Use Disorder (SUD) Service Providers

Substance Use Disorder (SUD) Benefit Expansion Update

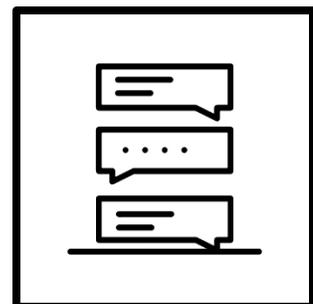
1115 SUD Demonstration Budget Neutrality Update

The budget neutrality calculations are being updated for the 1115 SUD Demonstration. The updated calculations will reflect the changes in bed capacity and reimbursement rates. Significant policy or operational impact are not anticipated from the updated calculations. Stakeholders and the public are invited to provide [feedback and comments](#) regarding this change.

SUD Provider Forum Update

The bimonthly SUD Provider Forum meetings have been repurposed to address the mandates in the legislation for [Senate Bill \(SB\) 21-137](#). Providers are encouraged to reach out to the Regional Accountable Entity(ies) they work with for technical assistance. A detailed agenda/project plan will be sent out for subsequent meetings to help organize time and meet the deadlines called out in the bill.

The SUD Provider Forum is open to residential SUD providers, the Office of Behavioral Health, Regional Accountable Entities, and Managed Care Service Organizations. Please register in advance using the Zoom registration links for each date.



The upcoming Forums are scheduled as follows:

August 4 from 2:00 - 3:00 p.m. MT [Zoom Meeting](#)

August 18 from 2:00 - 3:00 p.m. MT [Zoom Meeting](#)

September 1 from 2:00 - 3:00 p.m. MT [Zoom Meeting](#)

Provider Manual for Residential and Inpatient SUD Services - July 2021 Update

The billing manual for residential and inpatient SUD services has been updated. The July 2021 edition of the [Provider Manual for Residential and Inpatient Substance Use Disorder \(SUD\) Services](#) can be found on the [Ensuring a Full Continuum of SUD Benefits webpage](#).

Visit the [Ensuring a Full Continuum of SUD Benefits web page](#) or direct inquiries to hcpf_sudbenefits@state.co.us for more information.

Provider Billing Training Sessions

August and September 2021 Provider Billing Webinar- Only Training Sessions

Providers are invited to participate in training sessions for an overview of Health First Colorado billing instructions and procedures. The current and following months' workshop calendars are shown below.

Who Should Attend?

Staff who submit claims, are new to billing Health First Colorado services, or need a billing refresher course should consider attending one or more of the following provider training sessions.



The institutional claims (UB-04) and professional claims (CMS 1500) training sessions provide high-level overviews of claim submission, prior authorizations, navigating the [Department's website](#), using the [Provider Web Portal](#), and more. For a preview of the training materials used in these sessions, refer to the Beginner Billing Training: Professional Claims (CMS 1500) and Beginner Billing Training: Institutional Claims (UB-04) available on the [Provider Training web page](#) under the Billing Training - Resources drop-down section.

For more training materials on navigating the Provider Web Portal, refer to the Provider Web Portal Quick Guides available on the [Quick Guides web page](#).

Note: Trainings may end prior to 11:30 a.m. MT. Time has been allotted for questions at the end of each session.

August 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9	10	11	12 Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m. - 11:30 a.m. MT	13	14
15	16	17	18	19 Beginner Billing Training: Institutional Claims (UB-04) 9:00 a.m. - 11:30 a.m. MT	20	21
22	23	24	25	26	27	28
29	30	31				

September 2021

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3	4
5	6 Labor Day (observed)	7	8	9 Beginner Billing Training: Professional Claims (CMS 1500) 9:00 a.m. - 11:30 a.m. MT	10	11
12	13	14	15	16	17	18
19	20	21	22	23 Beginner Billing Training: Institutional Claims (UB- 04) 9:00 a.m. - 11:30 a.m. MT	24	25
26	27	28	29	30		

Live Webinar Registration

Register for a live webinar by clicking the title of the desired training session in the calendar above and completing the webinar registration form. An automated response will confirm the reservation. For questions or issues regarding webinar registration, email co.training@gainwelltechnologies.com with the subject line "Webinar Help." Include a description of the issue being experienced, name and contact information (email address and phone number), and the name and date of the webinar(s) to be attended. Allow up to 2-3 business days to receive a response.

Upcoming Holidays

Holiday	Closed Offices/Offices Open for Business
Labor Day Monday, September 6	State Offices, DentaQuest, Gainwell Technologies and the ColoradoPAR Program will be closed. Capitation cycles for managed care entities may potentially be delayed. The receipt of warrants and EFTs may potentially be delayed due to the processing at the United State Postal Service or providers' individual banks.

Gainwell Technologies Contacts

Provider Services Call Center

1-844-235-2387

Gainwell Technologies Mailing Address

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Denver, CO 80201